PART B - FEE(S) TRANSMITTAL

Complete and send this form, together with applicable fee(s), to: Mail Mail Stop ISSUE FEE Commissioner for Patents P.O. Box 1450
Alexandria, Virginia 22313-1450

or Fax (571)-273-2885

INSTRUCTIONS: This form should be used for transmitting the ISSUE FEE and PUBLICATION FEE (if required). Blocks 1 through 5 should be completed where appropriate. All further correspondence including the Patent, advance orders and notification of maintenance fees will be mailed to the current correspondence address as indicated unless corrected below or directed otherwise in Block 1, by (a) specifying a new correspondence address; and/or (b) indicating a separate "FEE ADDRESS" for maintenance fee notifications.

CURRENT CORRESPONDENCE ADDRESS (Note: Use Block I for any change of althors)

Ť 21901

7590

04/04/2007

SMITH HOPEN, PA 180 PINE AVENUE NORTH OLDSMAR, FL 34677 07/06/2007 HDEHESS2 00000008 10710984

01 FC:2502

400.00 OP

Note: A certificate of mailing can only be used for domestic mailings of the Rec(s) Transmitted, This certificate cannot be used for any other accompanying papers. Each additional paper, such as an assignment or formal drawing, must have its own certificate of mailing or transmission.

Certificate of Mailing or Transmission
I hereby certify that this Fee(s) Transmittal is being deposited with the United
States Postal Service with sufficient postage for first class mail in an queelope
addressed to the Mail Stop ISSUE FEE address above, or being fassimile
transmitted to the USPTO (571) 273-2885, on the date indicated below.

April Turley (Depustur's name) arril Dur a (Signemo) July 5, 2007 0 (Date)

APPLICATION NO.	FILING DATE	first named inventor	ATTORNEY DOCKET NO.	Confirmation no.
10/710,984	08/16/2004	Shekhar Bhansali	1372-187.PRC	9395

TITLE OF INVENTION: WET ETCHING PROCESS

•							
APPLN. TYPE	SMALL ENTITY	issue fee due	PUBLICATION FEE DUE	PREV. PAID ISSUE FEE	Total Pee(s) dub	DATE DUE .	
nonprovisional	YES	\$700	\$0	. 02	\$700	07/05/2007	
EXAMINER ART UNIT		ART UNIT	CLASS-SUBCLASS				
ALANKO, A	NITA KAREN	1765	216-002000				
Change of correspond PR 1.363).	lance address or indicatio	n of "Fee Address" (37	2. For printing on the p		T MC LOW t	. Sauter	
Change of correspondence address (or Change of Carrespondence Address farm PTO/SB/123) attached.			or agents OR, alternatively,				
			(2) the name of a single registered attorney or a	e firm (baving as a member (cent) and the names of u	era 2 <u>SMltn 8</u>	Hopen, P	
The Address Indication (or "Fee Address" Indication form PTO/SB/47; Rev 03-02 or more recent) attached. Use of a Customer Number is required. Tegistered attorney or agent) and the names of up to 2 registered parent automays or agents. If no name is 1 listed, no name will be printed.							
ASSIGNEE NAME A	ND RESIDENCE DATA	A TO BE PRINTED ON	THE PATENT (print or typ)¢)			
PLEASE NOTE: Un recordation as set for	less an assignee is ident in in 37 CFR 3.11. Com	filed below, no assignee of the form is of the	data will appear on the pa Ta substitute for filing an	ntent. If an assignee is id assignment.	entified below, the docu	ment has been filed f	
(A) NAMB OF ASSI	GNEE .		(B) RESIDENCE: (CITY	and STATE OR COUNT	RY)		
Universi	ty of South	Florida	Tampa,	Florida		i	
ease check the approp	riste assignee rategory or	categories (will not be pr	inted on the patent):	Individual Q Corporation	on or other private group	entity O Governme	
. The following fee(s)	are submitted:	41	. Payment of Pee(s): (Plea	se first reapply any prev	lously paid issue fee sho	wa above)	
Issue Fee			A check is enclosed.				
Publication Fee (No small entity discount permitted)			☑ Payment by credit card. Form PTO-2038 is attached. ☐ The Director is hereby authorized to charge the required fee(s), any deficiency, or credit any overpayment, to Deposit Account Number				
Advance Order -	# of Coples		bycrpayment, to Depos	authorized to charge the resit Account Number	equired fee(s), any defici- coclose an ex	ency, or credit any tira copy of this form).	
Change in Entity Sta	tus (from status indicate	d ahove)					
a. Applicant claim	SMALL ENTITY state	s. See 37 CFR 1.27.	D b. Applicant is no long	ger claiming SMALL ENT	TTY status. See 37 CFR	1.27(g)(2).	
OTE: The Lisue Fee at terest as shown by the	d Publication Fee (if requestroyed Sta	uired) will not be accepted tes Putent and Trademark	d from anyone other than the Office.	ne applicant; a registered a	noney or agent; or the a	ssignee or other party i	
Authorized Signature	WA			Date July 5,	2007		
Typed or printed name	e Thomas E.	Toner	•	Registration No. 5	7,422		

This collection of information is required by 37 CFR 1.311. The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.14. This collection is estimated to take 12 minutes to complete, including gathering, preparing, and submitting the completed application form to the USFTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form antior suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patient and Trademark Office, U.S. Department of Commerce, P.O. BOX 1450, Alexandria, Virginia 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patients, P.O. BOX 1450, Alexandria, Virginia 22313-1450.

Under the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it displays a valid OMB control number.

PAGE 3/4 * RCVD AT 7/5/2007 2:24:34 PM [Eastern Daylight Time] * SVR:USPTO-EFXRF-3/11 * DNIS:2732885 * CSID:8139258525 * DURATION (mm-ss):0148

700.00

잂

10/09/2007 SDIRĚT



smith & hopen, p.a.

180 Pine Avenue North Oldsmar, Florida 813.925.8505 Tel 813.925-8525 Fax www.smithhopen.com

Fax

INTELLECTUAL PROPERTY LA W

To:	U.S. Patent & Trademark Office		Molly Sauter	
Attn:	Mail Stop Issue Fee	Client	1372.187.PRC	
Fox:	(571) 273-2885	Pages	: 4 including cover	sheet
Phone:		Date:	July 5, 2007	
Re:	USSN: 10/710,984	. сс:	University of South	n Florida
□ Urge	ent Ø For Review	☐ Please Comment	🗅 Please Reply	Please Recycle

Dear Sir or Madam:

In response to the Notice of Allowance mailed April 4, 2007, we enclose the following:

- Transmittal of Payment of Issue Fee with Certificate of Facsimile Transmission under 37 CFR 1.8(a) dated July 5, 2007 (1 page);
- 2) Form PTOL-85 (1 page); and
- 3) Credit Card Payment Form PTO-2038 in the amount of \$700.00 (1 page).

Very respectfully,

Molly Sauter Reg. No. 46,457

The documentation accompanying this transmission contains information from the Law Office of Smith & Hopen, P.A., which is confidential and/or privileged. The information is intended only for the use of the individual or entity named on this sheet. If you are not the intended recipient, you are hereby notified that any disclosure, copying, distribution, or the taking of any action in reliance upon the contents of this telecopied information is strictly prohibited. If you have received this transmission in error, please notify us by telephone irramediately, so that we can arrange for the return of the original documents to us at no cost to you.

JUL O D 2007 W

IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

Selecation No.

: 10/710,984

Confirmation No.: 9395

Applicants:

: Shekhar Bhansali et al.

Filed:

: 08/16/2004

TC/A.U.

: 1765

Examiner

: Anita Karen Alanko

Docket No.

: 1372.187.PRC

Customer No.

: 21,901

For

: Wet Etching Process

Faxed to (571) 273-2885 Mail Stop ISSUE FEE Commissioner for Patents

P.O. Box 1450

Alexandria, VA 22313-1450

TRANSMITTAL OF PAYMENT OF ISSUE FEE (37 C.F.R. 1.311)

- 1. Applicant hereby pays the issue fee and publication fee for the attached Issue Fee Transmittal PTOL-85.
- 2. Fee (37 C.F.R. 1.18(a)):

Fee

Application status is Small Entity—fee:

\$700.00

3. Payment of fee:

Enclosed please find Credit Card Payment Form PTO-2038 for \$1000.00

SIGNATURE OF PRACTITIONER

Reg. No. 46,457

Tel. No.: (813) 925-8505

Molly Sauter

180 Pine Avenue North Oldsmar, Florida 34677 Customer No.: 21,901

CERTIFICATE OF FACSIMILE TRANSMISSION (37 C.F.R. 1.8(a))

I HEREBY CERTIFY that this correspondence and payment is being transmitted to the United States Patent and Trademark Office by facsimile to (571) 273-2885 on July 5, 2007

Dated: July 5, 2007

April Durley